

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Adelfio, Regina M.		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-3875		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 2210 Prentiss Dr. Apt 305 Downers Grove, IL		Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 60516		ZIP Code
County of Residence or of the Principal Place of Business: DuPage		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):
ZIP Code		ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Adelfio, Regina M.
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)		
Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). X /s/ Joseph P. Doyle January 31, 2015 Signature of Attorney for Debtor(s) (Date) Joseph P. Doyle 6277393
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.		
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue (Check any applicable box)		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes)		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
<hr/> (Name of landlord that obtained judgment) <hr/> (Address of landlord) <hr/>		
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

Voluntary Petition*(This page must be completed and filed in every case)***Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Regina M. AdelfioSignature of Debtor **Regina M. Adelfio****X**

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

January 31, 2015

Date

Signature of Attorney***X /s/ Joseph P. Doyle**

Signature of Attorney for Debtor(s)

Joseph P. Doyle 6277393

Printed Name of Attorney for Debtor(s)

Law Office of Joseph P. Doyle LLC

Firm Name

**105 S. Roselle Road, Suite 203
Schaumburg, IL 60193**

Address

**Email: joe@fightbills.com
847-985-1100 Fax: 847-985-1126**

Telephone Number

January 31, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Adelfio, Regina M.**Signatures****Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court
Northern District of Illinois

In re Regina M. Adelfio

Debtor(s)

Case No.

Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.]* *[Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Regina M. Adelfio
Regina M. Adelfio

Date: January 31, 2015

United States Bankruptcy Court
Northern District of Illinois

In re **Regina M. Adelfio**

Debtor

Case No. _____

Chapter _____

7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	19,776.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		20,755.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	29		105,797.58	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,372.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,294.00
Total Number of Sheets of ALL Schedules		42			
		Total Assets	19,776.00		
			Total Liabilities	126,552.58	

**United States Bankruptcy Court
Northern District of Illinois**

In re **Regina M. Adelfio**

Case No. _____

Debtor

Chapter _____

7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	3,372.00
Average Expenses (from Schedule J, Line 22)	3,294.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	4,288.18

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		5,614.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		105,797.58
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		111,411.58

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDEULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account with Bank of America	-	800.00
		Savings account with Bank of America	-	0.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Miscellaneous used household goods and furnishings	-	350.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, Pictures, and CD's	-	90.00
6. Wearing apparel.		Wearing Apparel	-	975.00
7. Furs and jewelry.		Miscellaneous Costume Jewelry	-	400.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term Life Insurance policy through employer - (No cash surrender value)	-	0.00
10. Annuities. Itemize and name each issuer.	X			
				Sub-Total > 2,615.00
				(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		Estimated 2014 tax refund of \$2000.00		2,000.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			Sub-Total > (Total of this page)	2,000.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY
 (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Automobile - 2013 Honda Civic LX - 27,000 miles - Current/Reaffirm - Full Coverage Auto Insurance		15,141.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.		2 - Dogs		20.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

 Sub-Total > **15,161.00**
 (Total of this page)
 Total > **19,776.00**
Sheet 2 of 2 continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re

Regina M. Adelfio

Case No. _____

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)
 11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u>			
Checking account with Bank of America	735 ILCS 5/12-1001(b)	800.00	800.00
<u>Household Goods and Furnishings</u>			
Miscellaneous used household goods and furnishings	735 ILCS 5/12-1001(b)	350.00	350.00
<u>Books, Pictures and Other Art Objects; Collectibles</u>			
Books, Pictures, and CD's	735 ILCS 5/12-1001(b)	90.00	90.00
<u>Wearing Apparel</u>			
Wearing Apparel	735 ILCS 5/12-1001(a)	100%	975.00
<u>Furs and Jewelry</u>			
Miscellaneous Costume Jewelry	735 ILCS 5/12-1001(b)	400.00	400.00
<u>Other Liquidated Debts Owing Debtor Including Tax Refund</u>			
Estimated 2014 tax refund of \$2000.00	735 ILCS 5/12-1001(b)	2,000.00	2,000.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
Automobile - 2013 Honda Civic LX - 27,000 miles - Current/Reaffirm - Full Coverage Auto Insurance	735 ILCS 5/12-1001(c)	2,400.00	15,141.00
<u>Animals</u>			
2 - Dogs	735 ILCS 5/12-1001(b)	20.00	20.00
		Total:	7,035.00
			19,776.00

0 continuation sheets attached to Schedule of Property Claimed as Exempt

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL				UNSECURED PORTION, IF ANY
				CONTINGENT	UNLIQUIDATED	DISPUTED		
Account No. xxxxx8904	-	Opened 9/14/13 Last Active 12/18/14				20,755.00	5,614.00	
American Honda Finance 2170 Point Blvd Ste 100 Elgin, IL 60123		Purchase Money Security						
		Automobile - 2013 Honda Civic LX - 27,000 miles - Current/Reaffirm - Full Coverage Auto Insurance						
		Value \$	15,141.00					
Account No.		Value \$						
		Value \$						
		Value \$						
Account No.		Value \$						
		Value \$						
Account No.		Value \$						
		Value \$						
0 continuation sheets attached		Subtotal (Total of this page)				20,755.00	5,614.00	
		Total (Report on Summary of Schedules)				20,755.00	5,614.00	

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

In re Regina M. Adelfio,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
				C	U	D	
Account No. xxx-xx-3875			2014 Medical				9,783.00
Adventist La Grange Memorial Hosp. PO Box 9234 Hinsdale, IL 60522							
Account No. xxx-xx-3875			2014 Medical				1,231.00
Advocate Good Samaritan PO Box 4257 Carol Stream, IL 60197-4257							
Account No. xxx-xx-3875			2011 Notice Only-Collection for TMobile				0.00
Afni PO Box 3068 Bloomington, IL 61702							
Account No. xxx-xx-3875			2013 Notice Only-Collection for US Cellular				0.00
AMO PO Box 926100 Norcross, GA 30010							
28 continuation sheets attached				Subtotal (Total of this page)			11,014.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2013 Medical				15.00
Arlington Ridge Pathology 520 E 22nd St Lombard, IL 60148	-					
Account No. xxxxxx4928		Opened 1/16/14 Collection Attorney City Of Rolling Mead				
Armor Systems Co 1700 Kiefer Dr Ste 1 Zion, IL 60099	-					200.00
Account No. xxxxxx8948		Opened 12/03/13 Collection Attorney Brookfield Police De				
Armor Systems Co 1700 Kiefer Dr Ste 1 Zion, IL 60099	-					50.00
Account No. xxxxxx8949		Opened 12/03/13 Collection Attorney Brookfield Police De				
Armor Systems Co 1700 Kiefer Dr Ste 1 Zion, IL 60099	-					25.00
Account No. xxx-xx-3875		2005 Collection-BEST Buy Internet				
Arrow Financial Services 5996 W. Touhy Avenue Niles, IL 60714	-					1,271.59
Sheet no. 1 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,561.59

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Medical				15.00
Associate Pathologists of Joliet 39784 Treasury Center Chicago, IL 60694-9700	-					
Account No. xxx-xxx-xxxx-4090		21.38 Telecommunications				21.38
AT&T PO Box 5080 Carol Stream, IL 60197	-					
Account No. xxxxxxxx9229		2014 Telecommunications				516.62
AT&T Mobility c/o Bankruptcy 1801 Valley View Ln Farmers Branch, TX 75234	-					
Account No. xx5173		Opened 11/07/08 Last Active 8/01/08 Collection Attorney Illinois Heart And V				975.00
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622	-					
Account No. xxx-xx-3875		2013 Notice Only-Collection for TreeHouse				0.00
AUM PO Box 4957 Oak Brook, IL 60522	-					
Sheet no. 2 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,528.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2013 Medical				737.21
Best Practices of Northwest, SC P.O. Box 758682 Baltimore, MD 21275-8682	-					
Account No. xxxx4729		2013 Broken lease agreement - Notice				0.00
BH Management 1652 Brookdale Road Naperville, IL 60563	-					
Account No. xxxx4729		2013 Notice Only - Broken lease agreement				0.00
BH Management Services, LLC 400 Locust St. Ste. 790 Des Moines, IA 50309	-					
Account No. xxxxxxxxxxxx2774		Opened 4/13/11 Last Active 4/01/12 Credit Card				556.00
Cap One 26525 N Riverwoods Blvd Mettawa, IL 60045	-					
Account No.						
Cardiology Interpretation 2801 Black	-					0.00
Sheet no. 3 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,293.21

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Medical				14.00
Cardiology Interpretation 2801 Black Rd Suite A Joliet, IL 60435	-					
Account No. xxxx8490		Opened 11/16/12 Last Active 4/01/12 Collection Attorney Hsbc Bank Nevada				559.00
Cavalry Portfolio Serv Po Box 27288 Tempe, AZ 85285	-					
Account No. xxx-xx-3875		2009 Notice Only-Collection for NICOR				0.00
CBE Group Inc. Attn: Bankruptcy Dept. 131 Tower Park, Suite 100 Waterloo, IA 50704	-					
Account No. xxx-xx-3875		2005 Notice Only-Collection for HSBC				0.00
CCB Credit Services 5300 S. 6th St. Springfield, IL 62703	-					
Account No. xx x6743		2014 Medical				15.35
CEP America Illinois PO Box 582663 Modesto, CA 95358	-					
Sheet no. 4 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			588.35

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Returned Check				297.82
Check N Go 1027 S. Roselle Rd Schaumburg, IL 60193	-					
Account No. xxx-xx-3875		2013 Notice Only				0.00
ChexSystems ATTN: Bankruptcy Department 7805 Hudson Rd. Suite 100 Woodbury, MN 55125	-					
Account No. xxx-xx-3875		2003 Collection-Limited Express				0.00
Client Services, Inc. Attn: Bankruptcy Dept. 3451 Harry Truman Blvd Saint Charles, MO 63301	-					
Account No. xxxxxxxxxxxx2916		2013 Utility				434.88
Comcast PO Box 3002 Southeastern, PA 19398	-					
Account No. xxxxxxxxxxxx0410		2014 Utility				292.98
Comcast PO Box 3002 Southeastern, PA 19398	-					
Sheet no. 5 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		1,025.68	

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2014 Telecommunications				374.65
Comcast Cable Processing Center 27 PO Box 55126 Boston, MA 02205	-					
Account No. xxxxxxxx0017		2008 Utility-Electric				1,076.20
ComEd 3 Lincoln Center ATTN: Bankruptcy Claims Dept Oak Brook Terrace, IL 60181	-					
Account No. xxxxxxxx6024		2013 Utility-Electric				351.00
ComEd 3 Lincoln Center ATTN: Bankruptcy Claims Dept Oak Brook Terrace, IL 60181	-					
Account No. xxxxxxxx5253		2012 Utility				28.06
ComEd 3 Lincoln Center ATTN: Bankruptcy Claims Dept Oak Brook Terrace, IL 60181	-					
Account No. xxxxxxxx5089		2013 Utility				235.70
ComEd 3 Lincoln Center ATTN: Bankruptcy Claims Dept Oak Brook Terrace, IL 60181	-					
Sheet no. 6 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			2,065.61

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2011 Collection-Household Bank				1,013.66
Commercial Recovery System 8035 E.R.L. Thornton #220 Dallas, TX 75228	-					
Account No. xxx-xx-3875		2004 Notice Only-Collection for Elmhurst				0.00
Computer Credit, Inc. 640 West Fourth Street P.O. Box 5238 Winston Salem, NC 27113-5238	-					
Account No. xxx-xx-3875		2012 Notice Only-Collection for Provena				0.00
Creditors Collection Bureau PO Box 63 Kankakee, IL 60901	-					
Account No. xxx-xx-3875		2012 Notice Only-Collection for Assoc Path				0.00
Creditors Discount & Audit 415 E Main St PO box 213 Streator, IL 61364-0213	-					
Account No. xx xx xx0557		2014 Notice Only-Attorney for Finger Company/Treehouse of Schaumburg				0.00
David K. Barhydt 2901 Butterfield Rd Oak Brook, IL 60521	-					
Sheet no. 7 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,013.66

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxx9717		2014 Notice Only-Collection for US Cellular				0.00
DCI PO Box 551268 Jacksonville, FL 32255	-					
Account No. xxx-xx-3875		2008 Notice Only-Collection for Suburban Radiologists				0.00
Dependon Collection Service P.O. Box 4833 Oak Brook, IL 60523-4833	-					
Account No. xxxx0161		Opened 7/21/13 Last Active 6/01/13 Collection Attorney Us Cellular				197.00
Diversified Adjustment 600 Coon Rapids Blvd Nw Coon Rapids, MN 55433	-					
Account No. xxxxx7729		2014 Medical				448.00
DuPage Emergency Physicians PO Box 88495 Dept A Chicago, IL 60680	-					
Account No. xxx-xx-3875		2007 Medical				169.00
DuPage Pathology Associates 520 E. 22nd Street Lombard, IL 60148	-					
Sheet no. 8 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 814.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2007 Medical				135.00
DuPage Pathology Associates 520 E. 22nd Street Lombard, IL 60148	-	2013 Notice Only				0.00
Account No. xxx1923		2004 Medical				653.00
Dynia & Associates, LLC 4849 N. Milwaukee Ave Suite 801 Chicago, IL 60630	-	2008 Medical				672.00
Account No. xxx-xx-3875		2012 Notice Only-Collection for Provena				0.00
Elmhurst Memorial Healthcare 155 Brush Hill Rd Elmhurst, IL 60126	-					
Account No. xxx-xx-3875						
Emergency Healthcare Phy 39182 Treasury Center Chicago, IL 60694	-					
Account No. xxx-xx-3875						
EMP of Will County PO Box 637527 Cincinnati, OH 45263	-					
Sheet no. 9 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,460.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2010 Notice Only-Collection for Arroe Financial Services				0.00
ERS, Inc. PO Box 9004 Renton, WA 98057-9004	-					
Account No. xxx-xx-3875		2012 Notice Only-Collection for Provena				0.00
Escallate LLC 5200 Stoneham Road Suite 200 North Canton, OH 44720	-					
Account No. xxxx1826		2013 Notice Only-Collection for Check n Go				0.00
Fairway Capital Recovery 4000 Executive Park Dr. Ste 300 Cincinnati, OH 45241	-					
Account No. xx-xxx xx-0202		2014 Notice Only-Finger Companies/Treehouse				0.00
Femco, Inc. c/o C T Corporation System 208 S. LaSalle St. Ste. 814 Chicago, IL 60604	-					
Account No. xxx-xx-3875		2011 Notice Only- Collection Applied Bank fka Cross Country Bank				0.00
First National Collection Bureau 610 Waltham Way Sparks, NV 89434	-					
Sheet no. 10 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 0.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx4000		Opened 1/21/10 Last Active 8/01/11 Credit Card				450.00
First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	-					
Account No. xxx-xx-3875		2012 Credit Account				250.00
First Premier Bank PO Box 5524 Sioux Falls, SD 57117	-					
Account No. xxx-xx-3875		2012 Insurance Cancelation				277.93
Geico One Geico Plaza Bethesda, MD 20810-0001	-					
Account No. xxx-xx-3875		2002 Deficiency Balance on Auto-2002 Chevy Cavalier				7,366.39
GMAC 1645 Ogden Ave. Downers Grove, IL 60515	-					
Account No. xxx-xx-3875		2012 Payday loan-Check n Go				619.82
Great Lakes Specialty Finance, Inc 1027 S. Roselle Rd. Schaumburg, IL 60193	-					
Sheet no. <u>11</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			8,964.14

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Payday Loan-Check n Go				550.00
Great Lakes Specialty Finance, Inc 1027 S. Roselle Rd. Schaumburg, IL 60193	-	2005 Medical				110.00
Account No. x4264		Opened 9/01/10 Last Active 11/05/13 Deficiency Balance on Auto-2007 Sebring				4,337.00
GSA 1645 Ogden Ave Downers Grove, IL 60515	-	2008 Notice Only-Collection for NICOR				0.00
Account No. xxx-xx-3875		2011 Notice Only-Collection for NWCH				0.00
Harris & Harris 111 W. Jackson Blvd. Suite 400 Chicago, IL 60604	-					
Account No. xxx-xx-3875						
Harris & Harris 111 W. Jackson Blvd. Suite 400 Chicago, IL 60604	-					
Sheet no. 12 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			4,997.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2011 Credit card				341.70
HSBC Card Services PO Box 17051 Baltimore, MD 21297	-					
Account No. xxx-xx-3875		2008 Notice Only-Collection for Loyola Univ Phyn				0.00
ICS PO Box 1010 Tinley Park, IL 60477	-					
Account No. xxx0714		2006 Notice Only-Collection for Grove Dental				0.00
ICS PO Box 1010 Tinley Park, IL 60477	-					
Account No. xxx-xx-3875		2008 Medical				2,340.00
Illinois Heart and Vascular Dept 20 1026 PO Box 5940 Carol Stream, IL 60197	-					
Account No. xxx-xx-3875		2013 Tollway Debt				1,401.02
Illinois Tollway 2700 Ogden Avenue Downers Grove, IL 60515	-					
Sheet no. 13 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			4,082.72

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012-2014 Notice Only-Tollway Debt				0.00
Illinois Tollway PO Box 5201 Lisle, IL 60532	-					
Account No. xxx9507		2012 Tollway Debt				131.70
Illinois Tollway 2700 Ogden Avenue Downers Grove, IL 60515	-					
Account No. xxx-xx-3875		2013 Notice Only-Collection for Premier Bank				0.00
Integrity Solutions SVCS 20 Corporate Hills Saint Charles, MO 63301	-					
Account No. xxx-xx-3875		2013 Notice Only-Collection for HSBC				0.00
JCC PO Box 519 Sauk Rapids, MN 56379	-					
Account No. xxx-xx-3875		2014 Collection-Premier Bank Card				450.82
Jefferson Capital Systems, LLC PO Box 953185 Saint Louis, MO 63195	-					
Sheet no. 14 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			582.52

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Medical				17.80
Joliet Radiology 36910 Treasury Center Chicago, IL 60694	-					
Account No. x3087		2012 Medical				17.80
Joliet Radiology 36910 Treasury Center Chicago, IL 60694	-					
Account No. xxx-xx-3875		2008 Notice Only-Collection for Emergency Healthcare				0.00
KCA Financial Services 628 North Street P.O. Box 53 Geneva, IL 60134	-					
Account No. xxx1935		2007 Medical				0.00
Life Watch 10255 W. Higgins Suite 100 Roesmont, IL 60018	-					
Account No. xxx-xx-3875		2013-2014 Medical				1,107.00
Loyola Univ Medical PO Box 3266 Milwaukee, WI 53201	-					
Sheet no. 15 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,142.60

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2010-2011 Medical				13,987.25
Loyola Univ Medical Center PO Box 6559 Carol Stream, IL 60197	-					
Account No. xxx-xx-3875		2009 Medical				1,665.50
Loyola Univ Medical Center PO Box 95994 Chicago, IL 60694	-					
Account No. xxx-xx-3875		2008 Medical				1,648.80
Loyola Univ Medical Center Attn: Bankruptcy Dept. 2160 S. First Avenue Maywood, IL 60153	-					
Account No. xxx-xx-3875		2007 Medical				3,029.25
Loyola Univ Medical Center Attn: Bankruptcy Dept. 2160 S. First Avenue Maywood, IL 60153	-					
Account No. xxx-xx-3875		2006 Medical				566.00
Loyola Univ Physicians 2160 S. First St Maywood, IL 60153	-					
Sheet no. 16 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		20,896.80	

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2008 Medical				40.63
Loyola Univ Physicians 2160 S. First St Maywood, IL 60153	-					
Account No. xxx-xx-3875		2006 Medical				1,659.61
Loyola University Medical Center P. O. Box 3266 Milwaukee, WI 53201-3266	-					
Account No. xxx-xx-3875		2014 Medical				328.00
LUMC Patient Payments PO Box 3021 Milwaukee, WI 53201	-					
Account No. xxx-xx-3875		2008 Notice Only-Collection for Adventist				0.00
Malcolm Gerald & Associates 322 S Michigan Ave Suite 600 Chicago, IL 60604	-					
Account No. xxx-xx-3875		2008 Notice Only-Collection for Rush-Oak Park				0.00
Medical Recovery 2350 East Devon Ave. Suite 225 Des Plaines, IL 60018	-					
Sheet no. 17 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			2,028.24

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2009 Notice Only-Collection for Adventist				0.00
Merchants Credit Guide 223 W Jackson Blvd. Suite 700 Chicago, IL 60606	-	2007 Medical				75.00
Account No. xxx-xx-3875		2013 Notice Only-Collection for NWCH				0.00
Mira Med Revenue Group 991 Oak Creek Dr. Lombard, IL 60148	-	2012 Collection-Vilage of Broadview				135.00
Account No. xxx-xx-3875		2008 Medical Collection-Adventist				0.00
NACS PO Box 182221 Chattanooga, TN 37422	-					
Sheet no. 18 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 210.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2001 Collection-Cross Country bank				532.00
National Asset Recovery Services PO Box 701 Chesterfield, MO 63006	-					
Account No. xxxxxxxxxx4830		2007 Notice Only-Collection for Loyola Univ.				0.00
Nationwide Credit and Collection 815 Commerce Dr. Suite 270 Oak Brook, IL 60523	-					
Account No. xxx-xx-3875		2014 Notice Only-Collection for Loyola Univ medical				0.00
NCC 815 Commerce Dr. Suite 270 Oak Brook, IL 60523	-					
Account No. xxx-xx-3875		2012 Collection-IL State Tollway Authority				1,218.00
NCO Financial PO Box 15618 Wilmington, DE 19850	-					
Account No. xxxxxx6548		2012 Notice Only-Collection for NiCor				0.00
NCO Financial PO Box 15630 Dept. 2 Wilmington, DE 19850	-					
Sheet no. 19 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		1,750.00	

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2010 Collection-Cross Country Bank				
NCO Financial PO Box 15630 Dept. 2 Wilmington, DE 19850	-					531.21
Account No. xxxxx9507		2013 Collection-IL State Tollway				
NCO Financial Systems 600 Holiday Plaza Suite 300 Matteson, IL 60443	-					19,090.05
Account No. xxx-xx-3875		2008 Utility				
Ni-Cor PO Box 5407 Carol Stream, IL 60197	-					1,089.00
Account No. xxx-xx-3875		2007 Notice Only-Collection for Adventist				
North American Credit Services 2810 Walker Road Suite 100 Chattanooga, TN 37421	-					0.00
Account No. xxxxx3447		2009 CollectionHousehold Bank				
Northland Group Inc PO Box 390905 Edina, MN 55439	-					765.13
Sheet no. 20 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			21,475.39

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Notice Only-Collection for LVNV				0.00
Northland Group Inc PO Box 390905 Edina, MN 55439	-					
Account No. xxx-xx-3875		2011 Medical				157.62
Northwest Community 800 W Central Rd Arlington Heights, IL 60005	-					
Account No. xxx-xx-3875		2013 Medical				284.35
Northwest Community Hospital 25709 Network Pl. Chicago, IL 60673	-					
Account No. xxx-xx-3875		2013 Medical				20.20
Northwest Radiology Associates, SC Attn: Bankruptcy Dept. 520 E. 22nd St. Lombard, IL 60148	-					
Account No. xxx-xx-3875		2014 Medical				470.72
NWC 25709 network Place Chicago, IL 60673	-					
Sheet no. 21 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 932.89

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2005 Credit card				636.41
Orchard Bank HSBC Card Services P.O. Box 17051 Baltimore, MD 21297	-					
Account No. xxx-xx-3875		2005 Collection				23.29
Palm Beach Tan 4646 Poplar Ave #447 Memphis, TN 38117	-					
Account No. xxx-xx-3875		2004 Notice Only				0.00
Pellettieri & Associates 991 Oak Creek Drive Lombard, IL 60148	-					
Account No. xxx-xx-3875		2013 Notice Only-Collection for Cache/HF				0.00
Pentagroup Financial PO Box 742209 Houston, TX 77274	-					
Account No. xxx9507		2013 Notice Only-Red Light Violation				0.00
Photo Enforcement Program 75 Remittance Dr. Suite 6658 Chicago, IL 60675	-					
Sheet no. 22 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			659.70

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2013 Medical				14.00
Professional Cardiac Services 520 E 22nd St Lombard, IL 60148	-					
Account No. xxx-xx-3875		2012 Medical				399.28
Provena Saint Joseph Hospital 75 Remittance Dr PO Box 1174 Chicago, IL 60675-1174	-					
Account No. xxx-xx-3875		2011 Collection-Express				1,159.78
RJM Acquisitions Funding LLC 575 Underhill Blvd Suite 224 Syosset, NY 11791	-					
Account No. xxxxx6502		2007 Medical				1,738.00
Rush Oak Park Hospital Dept 4667 Carol Stream, IL 60122	-					
Account No. xxx-xx-3875		2012 Notice Only-Collection for Premier CC				0.00
Rushmore Service Center PO Box 5507 Sioux Falls, SD 57117-5507	-					
Sheet no. 23 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		3,311.06	

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2014 Notice Only-Collection for CEP America				0.00
SCCS 314 14th St PO Box 480 Modesto, CA 95353	-					
Account No. xxx-xx-3875		2013 Collection-PLS Financial Services				883.34
Second Round LP PO box 41955 Austin, TX 78704-1955	-					
Account No. xxx-xx-3875		2015 Notice Only-Collection for AT&T Mobility				0.00
Southwest Credit 4120 International Pkwy Suite 1100 Carrollton, TX 75007-1958	-					
Account No. xxx-xx-3875		2005 Telecommunications				87.15
Sprint Nextel ATTN: Bankruptcy Dept POB 7949 Overland Park, KS 66207-0949	-					
Account No. xxx6798		2013 Notice Only-Collection for Prof Cardiac Services				0.00
State Collection Services 2509 S. Stoughton Rd. Madison, WI 53716	-					
Sheet no. 24 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 970.49

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxx7098		Opened 5/12/14 Last Active 2/01/14 Collection Attorney Comcast				
Stellar Recovery Inc 4500 Salisbury Rd Ste 10 Jacksonville, FL 32216	-					295.00
Account No. xxx-xx-3875		2013 Medical				
Suburban Ear Nose & Throat Spec LTD 880 West Central Rd Suite 700 Arlington Heights, IL 60005	-					4.40
Account No. xx-xxx1842		2008 Medical				
Suburban Radiologists 1446 Momentum PL Chicago, IL 60689	-					940.00
Account No. xxx-xx-3875		2004 Ticket				
T-Mobile PO Box 742596 Cincinnati, OH 45274	-					167.15
Account No. xxx-xx-3875		2010 Insurance Cancelation				
Talro Insurance Agency 4900 W Belmont Chicago, IL 60641	-					94.54
Sheet no. 25 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,501.09

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2012 Notice Only-Collection for GMAC				0.00
Tate & Kirlin 2810 Southampton Philadelphia, PA 19154	-					
Account No. xxx-xx-3875		2010 Collection				56.94
The Billing Center Time Customer Service, Inc. P.O. Box 62121 Tampa, FL 33662-2121	-					
Account No. xxx4665		2008 Notice Only-Collection for ComEd				0.00
Torres Credit Serv PO Box 189 Carlisle, PA 17015-3121	-					
Account No. xx-xxx-xx-xx02-03		2014 Broken lease agreement/Damages				8,416.74
Treehouse of Schaumburg Ph. II 2500 Brush Schaumburg, IL 60173	-					
Account No. xxx-xx-3875		2007 Notice Only-Collection for Best Buy				0.00
TrueLogic Financial PO Box 4387 Englewood, CO 80155	-					
Sheet no. 26 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		8,473.68	

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B E T O R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CO N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2008 Notice Only-Collection for Univ Path				0.00
United Collection Bureau 5620 Southwyck Blvd, Suite 206 Toledo, OH 43614	-					
Account No. xxx-xx-3875		2008 Medical				130.00
University Pathologists 5620 Southwyck Toledo, OH 43614	-					
Account No. 6753		2012 Overdraft				716.17
US Bank-Recovery dept. PO Box 5227 CN-OH-W15 Cincinnati, OH 45202	-					
Account No. xxxxx9717		2013 Telecommunications				352.83
US Cellular PO Box 0203 Palatine, IL 60055-0203	-					
Account No. xxx-xx-3875		2005 Notice Only				0.00
Valentine & Kebartas, Inc. 15 Union Street Lawrence, MA 01840	-					
Sheet no. 27 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			1,199.00

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-3875		2008 Notice Only-Collection for COMED				0.00
VanRu Credit Corp 1350 E Touhy #100E Des Plaines, IL 60018	-					
Account No. xxxxxxxxxx5-001		2014 Telecommunications				181.16
Verizon Wireless Bankruptcy 500 Technology Dr. Suite 550 Weldon Spring, MO 63304	-					
Account No. xxx-xx-3875		2004 Ticket				75.00
Village of Niles 1000 Civic Center Dr. Niles, IL 60714	-					
Account No. xxx-xx-3875		2011 Notice Only-Collection for GMAC				0.00
Vision Financial Corp 6774 Troy Dr Rockford, IL 61107	-					
Account No. xxxxx9747		2008 Notice Only-Collection for GSAC/2002 Chevy Cavalier				0.00
Vital Recovery Services 3795 Data Drive Suite 200 Norcross, GA 30092	-					
Sheet no. 28 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			256.16
			Total (Report on Summary of Schedules)			105,797.58

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

0

continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

In re **Regina M. Adelfio**

Case No. _____

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1	<u>Regina M. Adelfio</u>
Debtor 2 (Spouse, if filing)	_____
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>
Case number (If known)	_____

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

	Debtor 1	Debtor 2 or non-filing spouse
<input checked="" type="checkbox"/> Employed	<input type="checkbox"/> Employed	
<input type="checkbox"/> Not employed	<input type="checkbox"/> Not employed	
Occupation	Manager	_____
Employer's name	The GAP	_____
Employer's address	555 N Michigan Ave. Chicago, IL 60611	_____

How long employed there?

2 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>4,833.00</u>	\$ <u>N/A</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>N/A</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>4,833.00</u>	\$ <u>N/A</u>

Debtor 1 Regina M. Adelfio

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4. \$ 4,833.00	\$ N/A	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ 1,305.00	\$ N/A	
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ N/A	
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ N/A	
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ N/A	
5e. Insurance	5e. \$ 156.00	\$ N/A	
5f. Domestic support obligations	5f. \$ 0.00	\$ N/A	
5g. Union dues	5g. \$ 0.00	\$ N/A	
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ N/A	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 1,461.00	\$ N/A	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 3,372.00	\$ N/A	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ N/A	
8b. Interest and dividends	8b. \$ 0.00	\$ N/A	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ N/A	
8d. Unemployment compensation	8d. \$ 0.00	\$ N/A	
8e. Social Security	8e. \$ 0.00	\$ N/A	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ N/A	
8g. Pension or retirement income	8g. \$ 0.00	\$ N/A	
8h. Other monthly income. Specify: _____	8h.+ \$ 0.00	+ \$ N/A	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.00	\$ N/A	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,372.00	+ \$ N/A	= \$ 3,372.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ 3,372.00		
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1	<u>Regina M. Adelfio</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date: _____
 MM / DD / YYYY
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? No

Do not list Debtor 1 and Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 1,050.00

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<u>0.00</u>
4b. \$	<u>21.00</u>
4c. \$	<u>0.00</u>
4d. \$	<u>0.00</u>
5. \$	<u>0.00</u>

Debtor 1 <u>Regina M. Adelfio</u>	Case number (if known)
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>150.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>0.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>225.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	
8. Childcare and children's education costs	7. \$ <u>375.00</u>
9. Clothing, laundry, and dry cleaning	8. \$ <u>0.00</u>
10. Personal care products and services	9. \$ <u>135.00</u>
11. Medical and dental expenses	10. \$ <u>100.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	11. \$ <u>80.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	12. \$ <u>480.00</u>
14. Charitable contributions and religious donations	13. \$ <u>100.00</u>
15. Insurance.	14. \$ <u>10.00</u>
Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>71.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ <u>397.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: <u>Tollway Debt</u>	17c. \$ <u>100.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6l).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	\$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .	19.
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>
21. Other: Specify: _____	21. +\$ <u>0.00</u>
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$ <u>3,294.00</u>
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>3,372.00</u>
23b. Copy your monthly expenses from line 22 above.	23b. -\$ <u>3,294.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>78.00</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes.	
Explain: _____	

United States Bankruptcy Court
Northern District of IllinoisIn re Regina M. Adelfio

Debtor(s)

Case No.

Chapter

7**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 44 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date January 31, 2015Signature /s/ Regina M. AdelfioRegina M. Adelfio

Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re Regina M. Adelfio

Debtor(s)

Case No.
Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$53,158.68	2014: Debtor Employment Income
\$48,034.00	2013: Debtor Employment Income
\$37,756.00	2012: Debtor Employment Income

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
--------	--------

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
The Finger Company v. Adelfio, Regina 14 M 000557	Forcible Entry & Detainer	Circuit Court of Cook County	Dismissed

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
------------------------------------------------------------------	-----------------	-----------------------------------

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------------	------------------------------------------------------------------	-----------------------------------

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Law Offices of Joseph P. Doyle 105 S. Roselle Rd. Suite 203 Schaumburg, IL 60193	2014	\$1050.00

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
-----------------------------------------------------------	------	-----------------------------------------------------

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
-------------------------------------------------	---------------------------------------------------------------------	----------------------------	------------------------------------------

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 2548 Crooked Creek Rd. #202 Schaumburg, IL 60193	NAME USED Regina M. Adelfio	DATES OF OCCUPANCY 4/2012 through 2/2014
------------------------------------------------------------------------	---------------------------------------	----------------------------------------------------

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18 . Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF
SOCIAL-SECURITY OR
OTHER INDIVIDUAL
TAXPAYER-I.D. NO.

NAME	(ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
------------------	-------------------------

None

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
------	---------

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
------------------	-------------

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
-------------------	----------------------	---------------------------------------------------------------------

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
-------------------	------------------------------------------------------

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
------------------	--------------------	------------------------

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
------------------	-------	---------------------------------------------

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
------	---------	--------------------

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
------------------	-------	---------------------

23 . Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
-----------------------------------------------------------	-----------------------------------	------------------------------------------------------------

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------------	--------------------------------------

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date January 31, 2015

Signature /s/ Regina M. Adelfio

Regina M. Adelfio
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

**United States Bankruptcy Court
Northern District of Illinois**

In re Regina M. Adelfio

Debtor(s)

Case No.
Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1		
Creditor's Name: American Honda Finance	Describe Property Securing Debt: Automobile - 2013 Honda Civic LX - 27,000 miles - Current/Reaffirm - Full Coverage Auto Insurance	
Property will be (check one):	<input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one):		
<input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).		
Property is (check one):	<input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date January 31, 2015

Signature /s/ Regina M. Adelfio
Regina M. Adelfio
Debtor

United States Bankruptcy Court
Northern District of Illinois

In re Regina M. Adelfio

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ <u>1,050.00</u>
Prior to the filing of this statement I have received	\$ <u>1,050.00</u>
Balance Due	\$ <u>0.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: January 31, 2015

/s/ Joseph P. Doyle

Joseph P. Doyle 6277393
Law Office of Joseph P. Doyle LLC
105 S. Roselle Road, Suite 203
Schaumburg, IL 60193
847-985-1100 Fax: 847-985-1126
joe@fightbills.com

BANKRUPTCY CONTRACT (Effective Nov. 1, 2011)

SECOND DEBT	THIRD DEBT	FOURTH DEBT
Mortgage Arrears _____	INSECURITY DEBT	
Mortgage Balance _____	C1C = 30k	
Car Balance _____	C4L Repaid	
Car #2 Balance <u>C1R</u>	76700	
Loans _____	←?→ _____	

Chapter 7 - eliminates dischargeable unsecured debts. Certain debts may not be dischargeable.

Client agrees that \$300.00 filing fee is a separate cost and is not included in the agreed legal fee. Client agrees that the \$40.00 fee for the credit report (per person) is a separate cost and is not included in the agreed legal fee. Client agrees that **1) TIMELY PAYMENT** - Client will pay in full prior to the last payment date; **2) REFUNDS** - If client decides to discontinue legal services at any time, client is only entitled to a refund or uncashed fees. Firm will take about 30 days to do an accounting and issue a refund check. Firm's hourly rate is \$250 per hour for purposes of determining what refund client is entitled to in the event that client disengages Firm as client's attorney. In order to discharge Firm, client must submit a written request. **3) COLLECTIONS** - Client agrees that if Firm is unable to collect its fees through the terms stated in this contract, Firm will be forced to refer your account to collections. Client is liable for all attorney's fees and costs incurred to collect the debt, including court costs, which will amount to no less than \$400.00. **4) LAW CHANGES** - Firm's advice to client is subject to changes in applicable State and Federal laws. Client agrees to hold Firm harmless for damages related to changes in the law that affect client's ability to qualify for bankruptcy relief or to discharge debts within a bankruptcy case. The law may change any day and Firm is not responsible for any delay. Pay in full immediately so Firm can get client's case filed or risk that changes in laws or court decisions will change the advice we give client. **5) RESCISSIONS** - Once client reaffirms a debt, client may only rescind the reaffirmation agreement by sending a written request, certified mail, return receipt requested, to Firm no less than two weeks prior to the bar date for rescissions. **6) STATE LAW PROCEEDINGS** - Client has been advised by Firm that Firm will not represent client in ANY state law matter, including, but not limited to, divorce proceedings, civil lawsuits, or contempt proceedings. Client is hereby advised to appear at any and all state court proceedings, unless specifically advised otherwise in writing. **7) ADDITIONAL FEES** - Client will be charged, and agrees to pay, additional fees for **a) Failing to list debts** by the time of filing that later have to be added to client's bankruptcy documents. The court charges \$30 to amend a petition. **b) Missing court date**. Client must attend a meeting of creditors approximately four weeks after client's case is filed. Firm still has to appear even if client does not, so Firm charges \$150 additional fee for any missed court date. Client agrees to call Firm three weeks after client's case has been filed to obtain the section 341 meeting date if client has not received notice of the meeting. **c) Adversary objection** to discharge based on fraudulent use on credit cards or other discharge issues. Firm's fee for negotiating a settlement is approximately \$300 to be paid in advance of settlement. Firm's fee for litigating a discharge issue is \$200 per hour, ten hours to be paid in advance. **d) Delays** - If client delays in paying the fees, returning the petition or in providing information to Firm, including appraisals, titles, bank account information. Firm reserves the right to charge additional fees which will amount to no less than \$100. **e) Lien avoidance** - Client agrees that the above quote fee does not include services provided to avoid judgment liens (\$250) _____, non-purchase money security interests (\$200) _____, or redemptions on vehicles (\$650) _____ to be paid prior to Firm drafting the motion. Client understands and agrees that if client does not pay the fee, Firm will not bring the motion and the lien will survive the bankruptcy. **f) Bounced checks** - Client agrees to pay a \$25 bounced check fee for any checks not honored by client's bank. **g) FULL DISCLOSURE** - Client agrees to fully disclose all financial information to Firm. Client agrees to disclose all of assets and debts and understands that it is a Federal crime to omit a creditor or other information from a bankruptcy petition.

Chapter 13 - debt repayment plan: consolidate debts and repay over 36 to 60 months.

You are responsible for post-filing mortgage payments and trustee payments.

X Levina DATE 3/21/12 RECORD # X

No part of this contract is meant to conflict with any part of the Court-Approved Retention Agreement, revised as of March 15, 2011, by the United States Bankruptcy Court for the Northern District of Illinois, and in any real or perceived conflict, the Provision of the Court-Approved Retention Agreement prevails.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court
Northern District of Illinois

In re Regina M. Adelfio

Debtor(s)

Case No.
Chapter 7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Regina M. Adelfio

Printed Name(s) of Debtor(s)

Case No. (if known) _____

/s/ Regina M. Adelfio

Signature of Debtor

January 31, 2015

Date

X

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
Northern District of Illinois**

In re Regina M. Adelfio

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors:

145

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: January 31, 2015

/s/ Regina M. Adelfio

Regina M. Adelfio

Signature of Debtor

Adventist La Grange Memorial Hosp.
PO Box 9234
Hinsdale, IL 60522

Advocate Good Samaritan
PO Box 4257
Carol Stream, IL 60197-4257

Afni
PO Box 3068
Bloomington, IL 61702

American Honda Finance
2170 Point Blvd Ste 100
Elgin, IL 60123

AMO
PO Box 926100
Norcross, GA 30010

Arlington Ridge Pathology
520 E 22nd St
Lombard, IL 60148

Armor Systems Co
1700 Kiefer Dr Ste 1
Zion, IL 60099

Armor Systems Co
1700 Kiefer Dr Ste 1
Zion, IL 60099

Armor Systems Co
1700 Kiefer Dr Ste 1
Zion, IL 60099

Arrow Financial Services
5996 W. Touhy Avenue
Niles, IL 60714

Associate Pathologists of Joliet
39784 Treasury Center
Chicago, IL 60694-9700

AT&T
PO Box 5080
Carol Stream, IL 60197

AT&T Mobility
c/o Bankruptcy
1801 Valley View Ln
Farmers Branch, TX 75234

Atg Credit
1700 W Cortland St Ste 2
Chicago, IL 60622

AUM
PO Box 4957
Oak Brook, IL 60522

Best Practices of Northwest, SC
P.O. Box 758682
Baltimore, MD 21275-8682

BH Management
1652 Brookdale Road
Naperville, IL 60563

BH Management Services, LLC
400 Locust St.
Ste. 790
Des Moines, IA 50309

Cap One
26525 N Riverwoods Blvd
Mettawa, IL 60045

Cardiology Interpretation
2801 Black

Cardiology Interpretation
2801 Black Rd
Suite A
Joliet, IL 60435

Cavalry Portfolio Serv
Po Box 27288
Tempe, AZ 85285

CBE Group Inc.
Attn: Bankruptcy Dept.
131 Tower Park, Suite 100
Waterloo, IA 50704

CCB Credit Services
5300 S. 6th St.
Springfield, IL 62703

CEPAmerica Illinois
PO Box 582663
Modesto, CA 95358

Check N Go
1027 S. Roselle Rd
Schaumburg, IL 60193

ChexSystems
ATTN: Bankruptcy Department
7805 Hudson Rd. Suite 100
Woodbury, MN 55125

Client Services, Inc.
Attn: Bankruptcy Dept.
3451 Harry Truman Blvd
Saint Charles, MO 63301

Comcast
PO Box 3002
Southeastern, PA 19398

Comcast
PO Box 3002
Southeastern, PA 19398

Comcast Cable
Processing Center 27
PO Box 55126
Boston, MA 02205

ComEd
3 Lincoln Center
ATTN: Bankruptcy Claims Dept
Oak Brook Terrace, IL 60181

ComEd
3 Lincoln Center
ATTN: Bankruptcy Claims Dept
Oak Brook Terrace, IL 60181

ComEd
3 Lincoln Center
ATTN: Bankruptcy Claims Dept
Oak Brook Terrace, IL 60181

ComEd
3 Lincoln Center
ATTN: Bankruptcy Claims Dept
Oak Brook Terrace, IL 60181

Commercial Recovery System
8035 E.R.L. Thornton
#220
Dallas, TX 75228

Computer Credit, Inc.
640 West Fourth Street
P.O. Box 5238
Winston Salem, NC 27113-5238

Creditors Collection Bureau
PO Box 63
Kankakee, IL 60901

Creditors Discount & Audit
415 E Main St
PO box 213
Streator, IL 61364-0213

David K. Barhydt
2901 Butterfield Rd
Oak Brook, IL 60521

DCI
PO Box 551268
Jacksonville, FL 32255

Dependon Collection Service
P.O. Box 4833
Oak Brook, IL 60523-4833

Diversified Adjustment
600 Coon Rapids Blvd Nw
Coon Rapids, MN 55433

DuPage Emergency Physicians
PO Box 88495 Dept A
Chicago, IL 60680

DuPage Pathology Associates
520 E. 22nd Street
Lombard, IL 60148

DuPage Pathology Associates
520 E. 22nd Street
Lombard, IL 60148

Dynia & Associates, LLC
4849 N. Milwaukee Ave
Suite 801
Chicago, IL 60630

Elmhurst Memorial Healthcare
155 Brush Hill Rd
Elmhurst, IL 60126

Emergency Healthcare Phy
39182 Treasury Center
Chicago, IL 60694

EMP of Will County
PO Box 637527
Cincinnati, OH 45263

ERS, Inc.
PO Box 9004
Renton, WA 98057-9004

Escallate LLC
5200 Stoneham Road
Suite 200
North Canton, OH 44720

Fairway Capital Recovery
4000 Executive Park Dr.
Ste 300
Cincinnati, OH 45241

Femco, Inc.
c/o C T Corporation System
208 S. LaSalle St. Ste. 814
Chicago, IL 60604

First National Collection Bureau
610 Waltham Way
Sparks, NV 89434

First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104

First Premier Bank
PO Box 5524
Sioux Falls, SD 57117

Geico
One Geico Plaza
Bethesda, MD 20810-0001

GMAC
1645 Ogden Ave.
Downers Grove, IL 60515

Great Lakes Specialty Finance, Inc
1027 S. Roselle Rd.
Schaumburg, IL 60193

Great Lakes Specialty Finance, Inc
1027 S. Roselle Rd.
Schaumburg, IL 60193

Grove Dental Associates
406 W Boughton Rd Suite B
Bolingbrook, IL 60440

GSA
1645 Ogden Ave
Downers Grove, IL 60515

Harris & Harris
111 W. Jackson Blvd.
Suite 400
Chicago, IL 60604

Harris & Harris
111 W. Jackson Blvd.
Suite 400
Chicago, IL 60604

HSBC Card Services
PO Box 17051
Baltimore, MD 21297

ICS
PO Box 1010
Tinley Park, IL 60477

ICS
PO Box 1010
Tinley Park, IL 60477

Illinois Heart and Vascular
Dept 20 1026
PO Box 5940
Carol Stream, IL 60197

Illinois Tollway
2700 Ogden Avenue
Downers Grove, IL 60515

Illinois Tollway
PO Box 5201
Lisle, IL 60532

Illinois Tollway
2700 Ogden Avenue
Downers Grove, IL 60515

Integrity Solutions SVCS
20 Corporate Hills
Saint Charles, MO 63301

JCC
PO Box 519
Sauk Rapids, MN 56379

Jefferson Capital Systems, LLC
PO Box 953185
Saint Louis, MO 63195

Joliet Radiology
36910 Treasury Center
Chicago, IL 60694

Joliet Radiology
36910 Treasury Center
Chicago, IL 60694

KCA Financial Services
628 North Street
P.O. Box 53
Geneva, IL 60134

Life Watch
10255 W. Higgins
Suite 100
Roesmont, IL 60018

Loyola Univ Medical
PO Box 3266
Milwaukee, WI 53201

Loyola Univ Medical Center
PO Box 6559
Carol Stream, IL 60197

Loyola Univ Medical Center
PO Box 95994
Chicago, IL 60694

Loyola Univ Medical Center
Attn: Bankruptcy Dept.
2160 S. First Avenue
Maywood, IL 60153

Loyola Univ Medical Center
Attn: Bankruptcy Dept.
2160 S. First Avenue
Maywood, IL 60153

Loyola Univ Physicians
2160 S. First St
Maywood, IL 60153

Loyola Univ Physicians
2160 S. First St
Maywood, IL 60153

Loyola University Medical Center
P. O. Box 3266
Milwaukee, WI 53201-3266

LUMC Patient Payments
PO Box 3021
Milwaukee, WI 53201

Malcolm Gerald & Associates
322 S Michigan Ave
Suite 600
Chicago, IL 60604

Medical Recovery
2350 East Devon Ave. Suite 225
Des Plaines, IL 60018

Merchants Credit Guide
223 W Jackson Blvd.
Suite 700
Chicago, IL 60606

Michael D Santilli DO
7345 Prescott Ln
La Grange, IL 60525

Mira Med Revenue Group
991 Oak Creek Dr.
Lombard, IL 60148

Municipal Collection Services
P.O. Box 666
Lansing, IL 60438-0666

NACS
PO Box 182221
Chattanooga, TN 37422

National Asset Recovery Services
PO Box 701
Chesterfield, MO 63006

Nationwide Credit and Collection
815 Commerce Dr.
Suite 270
Oak Brook, IL 60523

NCC
815 Commerce Dr.
Suite 270
Oak Brook, IL 60523

NCO Financial
PO Box 15618
Wilmington, DE 19850

NCO Financial
PO Box 15630
Dept. 2
Wilmington, DE 19850

NCO Financial
PO Box 15630
Dept. 2
Wilmington, DE 19850

NCO Financial Systems
600 Holiday Plaza
Suite 300
Matteson, IL 60443

Ni-Cor
PO Box 5407
Carol Stream, IL 60197

North American Credit Services
2810 Walker Road
Suite 100
Chattanooga, TN 37421

Northland Group Inc
PO Box 390905
Edina, MN 55439

Northland Group Inc
PO Box 390905
Edina, MN 55439

Northwest Community
800 W Central Rd
Arlington Heights, IL 60005

Northwest Community Hospital
25709 Network Pl.
Chicago, IL 60673

Northwest Radiology Associates, SC
Attn: Bankruptcy Dept.
520 E. 22nd St.
Lombard, IL 60148

NWC
25709 network Place
Chicago, IL 60673

Orchard Bank
HSBC Card Services
P.O. Box 17051
Baltimore, MD 21297

Palm Beach Tan
4646 Poplar Ave #447
Memphis, TN 38117

Pellettieri & Associates
991 Oak Creek Drive
Lombard, IL 60148

Pentagroup Financial
PO Box 742209
Houston, TX 77274

Photo Enforcement Program
75 Remittance Dr. Suite 6658
Chicago, IL 60675

Professional Cardiac Services
520 E 22nd St
Lombard, IL 60148

Provena Saint Joseph Hospital
75 Remittance Dr
PO Box 1174
Chicago, IL 60675-1174

RJM Acquisitions Funding LLC
575 Underhill Blvd
Suite 224
Syosset, NY 11791

Rush Oak Park Hospital
Dept 4667
Carol Stream, IL 60122

Rushmore Service Center
PO Box 5507
Sioux Falls, SD 57117-5507

SCCS
314 14th St
PO Box 480
Modesto, CA 95353

Second Round LP
PO box 41955
Austin, TX 78704-1955

Southwest Credit
4120 International Pkwy Suite 1100
Carrollton, TX 75007-1958

Sprint Nextel
ATTN: Bankruptcy Dept
POB 7949
Overland Park, KS 66207-0949

State Collection Services
2509 S. Stoughton Rd.
Madison, WI 53716

Stellar Recovery Inc
4500 Salisbury Rd Ste 10
Jacksonville, FL 32216

Suburban Ear Nose & Throat Spec LTD
880 West Central Rd
Suite 700
Arlington Heights, IL 60005

Suburban Radiologists
1446 Momentum PL
Chicago, IL 60689

T-Mobile
PO Box 742596
Cincinnati, OH 45274

Talro Insurance Agency
4900 W Belmont
Chicago, IL 60641

Tate & Kirlin
2810 Southhampton
Philadelphia, PA 19154

The Billing Center
Time Customer Service, Inc.
P.O. Box 62121
Tampa, FL 33662-2121

Torres Credit Serv
PO Box 189
Carlisle, PA 17015-3121

Treehouse of Schaumburg Ph. II
2500 Brush
Schaumburg, IL 60173

TrueLogic Financial
PO Box 4387
Englewood, CO 80155

United Collection Bureau
5620 Southwyck Blvd, Suite 206
Toledo, OH 43614

University Pathologists
5620 Southwyck
Toledo, OH 43614

US Bank-Recovery dept.
PO Box 5227
CN-OH-W15
Cincinnati, OH 45202

US Cellular
PO Box 0203
Palatine, IL 60055-0203

Valentine & Kebartas, Inc.
15 Union Street
Lawrence, MA 01840

VanRu Credit Corp
1350 E Touhy #100E
Des Plaines, IL 60018

Verizon Wireless Bankruptcy
500 Technology Dr.
Suite 550
Weldon Spring, MO 63304

Village of Niles
1000 Civic Center Dr.
Niles, IL 60714

Vision Financial Corp
6774 Troy Dr
Rockford, IL 61107

Vital Recovery Services
3795 Data Drive
Suite 200
Norcross, GA 30092